

## Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER <b>Myrna Ngipol</b>	LICENSE NUMBER <b>752357</b>
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**NOTE:** The term “the home” refers to the adult family home / provider listed above.

The scope of care, services, and activities listed on this form may not reflect all required care and services the home must provide. The home may not be able to provide services beyond those disclosed on this form, unless the needs can be met through “reasonable accommodations.” The home may also need to reduce the level of care they are able to provide based on the needs of the residents already in the home. For more information on reasonable accommodations and the regulations for adult family homes, see [Chapter 388-76](#) of Washington Administrative Code.

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### About the Home

#### 1. PROVIDERS STATEMENT (OPTIONAL)

The optional provider's statement is free text description of the mission, values, and/or other distinct attributes of the home.

**The care staff in this home will try to accomodate each and every individual's care with the utmost care and compassion. There are those special moments when someone says or does something and you know you've made a difference in someone's life. That's why I became a caregiver!**

#### 2. INITIAL LICENSING DATE

**02/01/2013**

#### 3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:

**14105 SE 28th Street Vancouver, WA 98683**

#### 4. SAME ADDRESS PREVIOUSLY LICENSED AS:

**None**

#### 5. OWNERSHIP

- ☐ Sole proprietor
- ☒ Limited Liability Corporation
- ☐ Co-owned by:
- ☐ Other:

## Personal Care

"Personal care services" means both physical assistance and/or prompting and supervising the performance of direct personal care tasks as determined by the resident's needs, and does not include assistance with tasks performed by a licensed health professional. (WAC 388-76-10000)

### 1. EATING

If needed, the home may provide assistance with eating as follows:

**Care staff will assist clients with eating, spoon feeding and liquid.**

### 2. TOILETING

If needed, the home may provide assistance with toileting as follows:

**Staff will assist clients at all time with toileting as well as empowering them to be independent in toileting.**

### 3. WALKING

If needed, the home may provide assistance with walking as follows:

**The clients who deemed independent per assessment should be walking until the client's ability to do so deminished. Otherwise staff should assist those individual who were assessed as walking with assistance.**

### 4. TRANSFERRING

If needed, the home may provide assistance with transferring as follows:

**Staff will assist clients that needed transferring to and from thier bed, wheelchair, lift chair or simply getting up from chair. We also have the option of using lifts that make it very easy transfer for client's that are obese or if clients wants easy and smooth transfer.**

### 5. POSITIONING

If needed, the home may provide assistance with positioning as follows:

**Elderly clients are prone to skin rashes and bedsores therefore the system was in placed to avoid sores to any part of the body by repositioning clients frequently or every two hours.**

### 6. PERSONAL HYGIENE

If needed, the home may provide assistance with personal hygiene as follows:

**Mostly elderly but not all needs assistance in this task, our caring staff will assist everyone to make sure that everyone is given help or offer help to the client's who are independent incase that day was not a good one to take care his/her personal hygiene.**

### 7. DRESSING

If needed, the home may provide assistance with dressing as follows:

**Our caring staff will always assist and or performed this task if client is unable and also according to assessment by such individual.**

### 8. BATHING

If needed, the home may provide assistance with bathing as follows:

**Our priority is make our client's happy and clean, therefore, per schedule an individual can get his/her bath on regular set days.**

### 9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

**The staff are taking care of 6 people, will finished task on time according to thier assessment.**

## Medication Services

If the home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications. (WAC 388-76-10430)

The type and amount of medication assistance provided by the home is:

**All type and amount of medication is being assisted here with the help of licensed nurse that come to the home.**

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

**The only exception is we limit the number of diabetic clients we provide care to at least 2-3 clients.**

#### **Skilled Nursing Services and Nurse Delegation**

If the home identifies that a resident has a need for nursing care and the home is not able to provide the care per chapter 18.79 RCW, the home must contract with a nurse currently licensed in the state of Washington to provide the nursing care and service, or hire or contract with a nurse to provide nurse delegation. (WAC 388-76-10405)

The home provides the following skilled nursing services:

**This home will work with SW home care and Gentiva per doctor authorization to come to home and do all the skilled nursing services , as we had been doing in the past.**

The home has the ability to provide the following skilled nursing services by delegation:

**There are some tasks that are not delegetable so with the help of these nurses we could provide excellent care.**

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

**If client's not met his/her expectation from skilled nursing, s/he have the right to ask for replacement of the nurse**

#### **Specialty Care Designations**

We have completed DSHS approved training for the following specialty care designations:

- ☒ Developmental disabilities
- ☒ Mental illness
- ☒ Dementia

ADDITIONAL COMMENTS REGARDING SPECIALTY CARE DESIGNATIONS

**None**

#### **Staffing**

The home's provider or entity representative must live in the home, or employ or have a contract with a resident manager who lives in the home and is responsible for the care and services of each resident at all times. The provider, entity representative, or resident manager is exempt from the requirement to live in the home if the home has 24-hour staffing coverage and a staff person who can make needed decisions is always present in the home. (WAC 388-76-10040)

- ☐ The provider lives in the home.
- ☒ A resident manager lives in the home and is responsible for the care and services of each resident at all times.
- ☐ The provider, entity representative, or resident manager does not live in the home but the home has 24-hour staffing coverage, and a staff person who can make needed decisions is always present in the home.

The normal staffing levels for the home are:

- ☐ Registered nurse, days and times: \_\_\_\_\_
- ☐ Licensed practical nurse, days and times: \_\_\_\_\_
- ☒ Certified nursing assistant or long term care workers, days and times: **Monday-Friday 7am-7pm, Sat-Sun 7a-7p**
- ☒ Awake staff at night
- ☐ Other: \_\_\_\_\_

ADDITIONAL COMMENTS REGARDING STAFFING

**Resident Manager manage the day to day ADLs of the clients and the overall happenings of the home.**

Cultural or Language Access
The home must serve meals that accommodate cultural and ethnic backgrounds (388-76-10415) and provide informational materials in a language understood by residents and prospective residents (Chapter 388-76 various sections)
The home is particularly focused on residents with the following background and/or languages: <b>This home can admit anyone who needed help with thier personal care regardless of background and language.</b>
ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS <b>This home is open to anyone who need physical help with thier ADLs but also making sure that we accept someone who can get along with everyone in the house with safety of other clients in mind.</b>
Medicaid
The home must fully disclose the home's policy on accepting Medicaid payments. The policy must clearly state the circumstances under which the home provides care for Medicaid eligible residents and for residents who become eligible for Medicaid after admission. (WAC 388-76-10522)  <input type="checkbox"/> The home is a private pay facility and does not accept Medicaid payments. <input checked="" type="checkbox"/> The home will accept Medicaid payments under the following conditions: <b>We are accepting medicaid and private payments</b>
ADDITIONAL COMMENTS REGARDING MEDICAID
Activities
The home must provide each resident with a list of activities customarily available in the home or arranged for by the home (WAC 388-76-10530).
The home provides the following: <b>Trips, card games and other activities that clients enjoy as not everyone is up to doing most of ADL.</b>
ADDITIONAL COMMENTS REGARDING ACTIVITIES <b>Staff always try to provide entertainment to clients who wants to participate only , is not a madatory.</b>

Please Return the completed form electronically to [AFHDisclosures@DSHS.WA.GOV](mailto:AFHDisclosures@DSHS.WA.GOV)

The form may also be returned by mail at:  
RCS – Attn: Disclosure of Services  
PO Box 45600  
Olympia, WA 98504-5600